#### **DEPARTMENT OF FINANCE BILL ANALYSIS**

AMENDMENT DATE: July 2, 2008

POSITION: Oppose

July 2, 2008

BILL NUMBER: SB 1394

AUTHOR: A. Lowenthal

SPONSOR: Epilepsy California

**BILL SUMMARY: Lapse of Consciousness: Reports to DMV** 

This bill would eliminate the mandatory requirement for physicians to report to the Department of Motor Vehicles (DMV) every patient whom they diagnose with a condition characterized by lapses of consciousness. Reports would be required for patients diagnosed with Alzheimer's disease or related disorders and other specified conditions.

## FISCAL SUMMARY

According to DMV, this bill would result in minimal savings due to the reduction in lapse of consciousness referrals and corresponding reexaminations performed by DMV. DMV indicates that, due to the permissive referrals by physicians authorized in this bill, there likely will be an increase in the number of referrals to DMV made by law enforcement or family members which could result in additional reexaminations performed by DMV.

### **COMMENTS**

Finance opposes this bill because discretionary, rather than mandatory, reporting requirements for physicians of individuals with conditions that could lead to a lapse of consciousness could result in an increase in traffic collisions and in the state's mileage death rate resulting from an increase in impaired drivers.

#### **ANALYSIS**

A. Programmatic Analysis

**Existing law** requires all physicians to report to the local health officer any patient 14 years or older who has been diagnosed with lapses of consciousness disorders such as seizures, brain tumors, narcolepsy, sleep apnea, and epilepsy. Other reportable conditions include Alzheimer's disease and related disorders, although these are technically characterized by dementia and not loss of

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Department Deputy Di	rector		Date	
Governor's Office:	Ву:	Date:	Position Approved Position Disapproved	
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consciousness, and abnormal metabolic states such as those associated with diabetes. The local health officer is then required to report the patient and his or her condition to DMV, which then sends a notice of reexamination to the driver.

#### This bill would:

- Eliminate the mandatory requirement, beginning January 1, 2010, that physicians report every patient they have diagnosed as having suffered a lapse of consciousness, except under specified circumstances.
- Require a physician, beginning January 1, 2010, to report specified information directly to the DMV in writing, as opposed to the local health officer, regarding certain patients they have diagnosed with Alzheimer's disease, dementia, or other disorders characterized by lapses of consciousness.
- Specify a report to DMV would not be required if the physician determines that the disorder can and likely will be controlled and stabilized within 30 days of the initial diagnosis and that the patient's condition during the 30-day period does not pose an undue risk to public safety.
- Require a physician to report a dangerous driver at the conclusion of the 30-day treatment period, if, during the 30-day treatment period the patient's condition fails to stabilize and the physician determines that the patient poses an imminent risk to the motoring public.
- Require DMV, upon receipt of a physician's report or request for reexamination, to reexamine the
  person's qualifications to operate a vehicle, and make a determination whether to restrict, make
  subject to terms and conditions of probation, revoke, or suspend a license based on the
  evaluation, reexamination, and assessment provided by the reporting physician. Another
  licensing action to be noted is for DMV to take "no action" upon the driving privilege when none
  is warranted.
- Require DMV to administer a behind the wheel drive test for a person subject to reexamination as a result of a lapse of consciousness.
- Require DMV, in consultation with appropriate professional medical organizations, to develop
  physician reporting forms on or before January 1, 2010, and, in cooperation with the Department
  of Public Health and in consultation with appropriate professional medical organizations, to
  adopt regulations by January 1, 2010, defining disorders characterized by recurrent lapses of
  consciousness and listing those disorders that do not require reporting under this bill.
- Exempt a physician from criminal and civil liability for making a report authorized or required by this bill.

**Discussion**: We understand the intent of this bill is to reduce the incidents of unnecessary drivers' license suspensions by reducing the incidents of lapse of consciousness reporting to DMV. The author's office notes that there are many persons who suffer only a single episode of a lapse of consciousness or who have a condition that is easily controlled that do not pose a threat to public safety.

The author's office cites studies that examined some of the impacts of mandatory physician reporting. One study found epileptic patients were more likely to inform their physician of seizure activity when physician reporting was not mandatory. Consequently, as a result of mandatory reporting, epileptic patients may fail to obtain appropriate care for their condition, which may in turn increase their risk to experience a collision.

However, by removing mandatory reporting requirements and providing physicians the discretion to report lapse of consciousness incidents to DMV, this bill could result in more impaired drivers with medical conditions that could adversely affect their driving abilities. This could lead to an increase in traffic collisions and the mileage death rate.

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SB 212 (Lowenthal, 2005) was similar in approach to SB 1394 and was vetoed. The veto message states: "This bill would eliminate, with few exceptions, the mandatory requirement that California physicians report to the Department of Motor Vehicles (DMV) every patient whom they diagnose with a condition characterized by lapses of consciousness. While these reporting requirements, which have been in place since 1939, may need to be streamlined, it is too great a risk to other motorists to simply eliminate reporting requirements altogether. One of DMV's primary mandates is to ensure that all drivers are competent to safely operate a motor vehicle. The DMV needs physician reporting in order to fulfill that mandate."

# B. Fiscal Analysis

According to DMV, this bill would result in minimal savings due to the reduction in lapse of consciousness referrals and corresponding reexaminations performed by DMV. DMV indicates that, due to the permissive referrals by physicians authorized in this bill, there likely will be an increase in the number of referrals to DMV made by law enforcement or family members which could result in additional reexaminations performed by DMV.

	SO	(Fiscal Impact by Fiscal Year)						
Code/Department	LA	(Dollars in Thousands)					_	
Agency or Revenue	CO	PROP					Fund	
Type	RV	98	FC	2008-2009 FC	2009-2010 FC	2010-2011	Code	
2740/DMV	SO	No No Fiscal Impact			0044			
4265/PublicHealth	SO	No No Fiscal Impact		0001				

<u>Fund Code</u> <u>Title</u>

0001 General Fund

0044 Motor Vehicle Account, STF